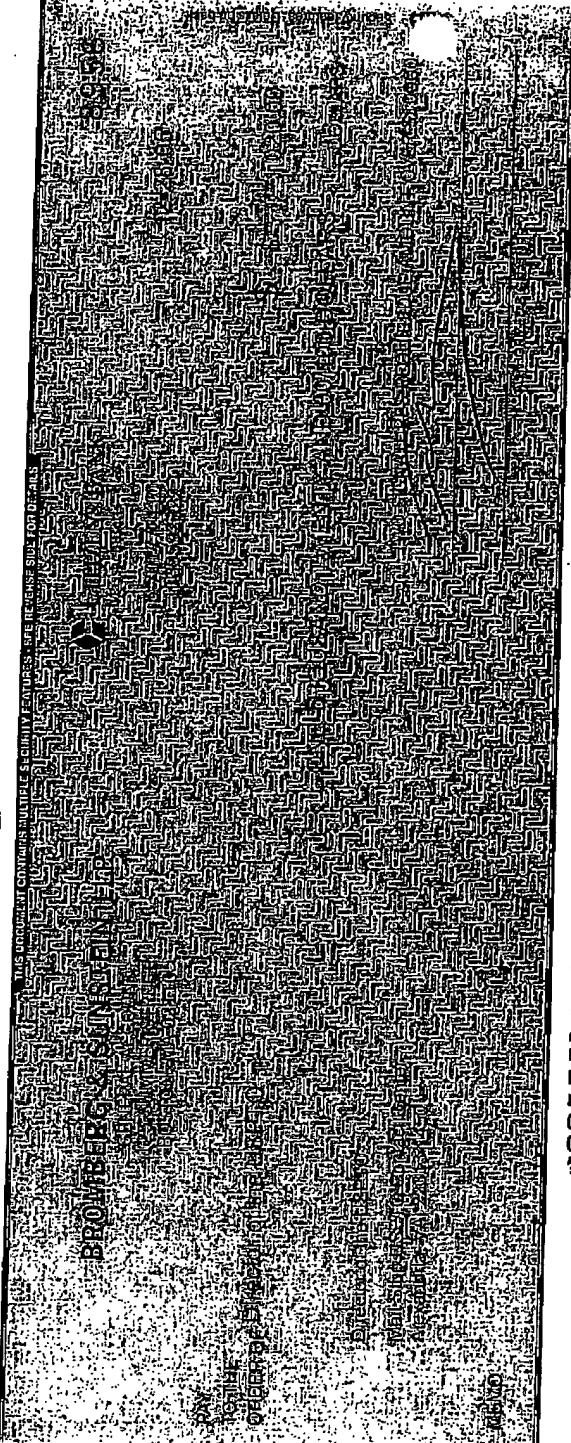


The Commissioner for Patents has received from Bromberg & Sunstein LLP the following:

Inventor:	Chapman et al.	Docket No.:	1050128
Title:	Harnesses	Art Unit:	3743
Serial/Patent No.:	10/812,495	Examiner:	Mitchell, Teena K.
Filing/Issue Date:	March 30, 2004	Date:	December 28, 2005
Express Mail No.:			
<b>Documents:</b>			
<input type="checkbox"/> New Application Transmittal <input type="checkbox"/> Provisional Application Cover Sheet <input type="checkbox"/> Description- <input type="checkbox"/> Claims- <input type="checkbox"/> Abstract- <input type="checkbox"/> Application Data Sheet <input type="checkbox"/> Request and Certification under 35 USC 122(b)(2)(B)(i) <input type="checkbox"/> sheets of drawings <input type="checkbox"/> formal <input type="checkbox"/> informal <input type="checkbox"/> Declaration & Power of Attorney <input type="checkbox"/> executed <input type="checkbox"/> unexecuted <input type="checkbox"/> <input type="checkbox"/>			
<input type="checkbox"/> Amendment Transmittal <input type="checkbox"/> Amendment (Preliminary) <input type="checkbox"/> Response - 9 pages <input type="checkbox"/> IDS & References <input type="checkbox"/> Petition for month extension <input type="checkbox"/> Issue Fee Transmittal & Form PTO-45b <input type="checkbox"/> Payment of Maintenance Fee <input type="checkbox"/> Assignment/Recordation Form Cover Sheet <input type="checkbox"/> Check in the amount of \$1,020.00 <input type="checkbox"/> Completion of Filing Requirements <input type="checkbox"/> Transmittal of Formal Drawings <input type="checkbox"/> Certified Copy of Priority Application			



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BROMBERG & SUNSTEIN LLP

Payee:	Director of the USPTO	Request Number:	8557	Check Number:	8956
Client:	Matter	Check Date:	Dec 28/05		
01050	00128	Narrative			
		Extension of Time 3 Months			
		Amount			
		1,020.00			

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## FACSIMILE

TO	Examiner Teena Mitchell Art Unit 3743, USPTO	FAX	(571) 273-8300
FROM	Timothy M. Murphy, Esq.	PAGES	31 (INCLUDING THIS SHEET)
PHONE	(617) 443-9292, Ext. 245	DATE	1/5/2006
RE	Application No.: 10/812,495		
OUR FILE	1050/128	YOUR FILE	

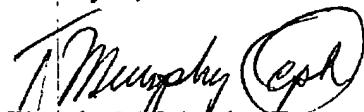
## COMMENTS

Dear Examiner Mitchell:

Per your request, I am transmitting herewith a copy of the response we filed on December 28, 2005. The original response included a certified copy of the priority document.

Please do not hesitate to contact me if you have any questions or need any additional information.

Thank you,



Timothy M. Murphy, Esq.

457589

PLEASE NOTIFY BROMBERG & SUNSTEIN LLP AT (617) 443-9292, IF THERE ARE ANY PROBLEMS WITH THIS TRANSMISSION.

THIS TRANSMITTAL IS INTENDED ONLY FOR THE ADDRESSEE, AND MAY CONTAIN INFORMATION THAT IS PRIVILEGED OR CONFIDENTIAL. IF THE RECIPIENT OF THIS TRANSMITTAL IS NOT THE ADDRESSEE, PLEASE NOTIFY US IMMEDIATELY BY TELEPHONE.

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**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY				
CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA					ADDIT. FEE
<b>TOTAL</b>	18	—	20	=	0	x	\$ 50.00 = \$ 0.00
<b>INDEP.</b>	3	—	3	=	0	x	\$ 200.00 = \$ 0.00
<b>FIRST PRESENTATION OF MULTIPLE DEP. CLAIM</b>				+	\$ 0.00	=	\$ 0.00
						<b>TOTAL ADDIT. FEE</b>	\$ 0.00

No additional fee for claims is required.

**FEE PAYMENT**

5. Attached is a check in the sum of \$1,020.00.

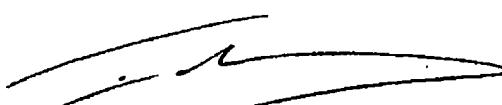
**FEE DEFICIENCY**

6. If an additional extension and/or fee is required, charge Account No. 19-4972.

If a fee for claims is required, charge Account No. 19-4972.

A duplicate of this paper is attached.

Date: December 28, 2005



Timothy M. Murphy  
Registration No. 33,198  
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125 Summer Street  
Boston, MA 02110-1618  
US  
617-443-9292  
Customer No. 02101

01050/00128 455869.1

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Amendment Transmittal—page 2 of 2

## FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

(Col. 1)	(Col. 2)	(Col. 3)	OTHER THAN A SMALL ENTITY				
<b>CLAIMS</b>							
REMAINING AFTER AMENDMENT	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA					
<b>TOTAL</b>	18	-	20	=	0	x	\$ 50.00 = \$ 0.00
<b>INDEP.</b>	3	-	3	=	0	x	\$ 200.00 = \$ 0.00
<b>FIRST PRESENTATION OF MULTIPLE DEP. CLAIM</b>				+	\$ 0.00	=	\$ 0.00
				<b>TOTAL ADDIT. FEE</b>		\$	\$ 0.00

No additional fee for claims is required.

## FEE PAYMENT

5. Attached is a check in the sum of \$1,020.00.

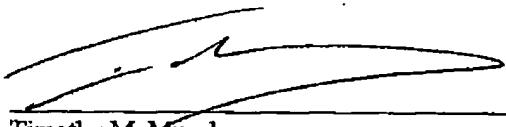
## FEE DEFICIENCY

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Amendment Transmittal—page 2 of 2

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